2009 H1N1 Vaccine Weekly Q&A for Providers

Can seasonal influenza vaccine and 2009 H1N1 vaccine be given at the same visit?

Injectable, inactivated flu vaccines can be administered at the same time, using separate sites. Injectable, inactivated flu vaccine can be administered with live attenuated nasal flu vaccine. Two live attenuated nasal flu vaccines can NOT be administered at the same time.

Can 2009 H1N1 vaccine be administered at the same visit as other vaccines?

Inactivated 2009 H1N1 vaccine can be administered at the same visit as any other vaccine, including pneumococcal polysaccharide vaccine. Live 2009 H1N1 vaccine can be administered at the same visit as any other live or inactivated vaccine EXCEPT seasonal live attenuated influenza vaccine.

Who should receive 2 doses of 2009 H1N1 monovalent vaccine?

Clinicians should administer two doses of 2009 H1N1 monovalent vaccine to children 6 months through 9 years of age. Persons 10 years and older should receive one dose.

The interval between 2009 H1N1 monovalent vaccine doses, for children 6 months through 9 years, is stated as "approximately 1 month" in the package inserts. What does "approximately 1 month" mean?

CDC recommends that the two doses of 2009 H1N1 monovalent vaccine be separated by 4 weeks. However, if the second dose is separated from the first dose by at least 21 days the second dose can be considered to be valid. If the interval separating the doses is less than 21 days the second dose should be repeated four weeks after the first dose was given.

If seasonal live attenuated influenza vaccine (LAIV) and 2009 H1N1 LAIV are given during the same visit, do either or both doses need to be repeated, and if so, when?

There are no data on the administration of seasonal and 2009 H1N1 LAIV during the same visit. CDC's Advisory Committee on Immunization Practices (ACIP) recommends that seasonal and 2009 H1N1 LAIV not be administered during the same visit. However, if both types of LAIV are inadvertently administered during the same visit, neither vaccine needs to be repeated.

If seasonal and 2009 H1N1 LAIV are not administered during the same visit, but are separated by less than 4 weeks, do either or both doses need to be repeated, and if so, when?

Seasonal LAIV and 2009 H1N1 LAIV should not be administered during the same visit, and should be separated by at least 4 weeks. However, if the interval between administration of seasonal LAIV and 2009 H1N1 vaccine is less than 4 weeks, neither vaccine needs to be repeated.

Can patients who are allergic to eggs receive the 2009 H1N1 flu vaccine?

Asking persons if they can eat eggs without adverse effects is a reasonable way to determine who might be at risk for allergic reactions from receiving influenza vaccines. Persons who have had hives or swelling of the lips or tongue, or who have experienced acute respiratory distress after eating eggs, should consult a physician for appropriate evaluation to help determine if influenza vaccine should be administered. Persons who have documented (IgE)-mediated hypersensitivity to eggs, including those who have had occupational asthma related to egg exposure or other allergic responses to egg protein, also might be at increased risk for allergic reactions to influenza vaccine, and should consult a physician prior to vaccine administration. A regimen has been developed for administering influenza vaccine to asthmatic children with severe disease and egg hypersensitivity (*J Pediatr* 1985;106:931-3.).

When will 2009 H1N1 vaccine be available in Indiana?

Vaccine is starting to arrive in Indiana. It is currently in limited supply. We expect supply of 2009 H1N1 vaccine to increase throughout the month.

What 2009 H1N1 vaccines are currently approved for use and what are the recommendations for their use?

FDA Approved Influenza A (H1N1) 2009 Monovalent Vaccine

Vaccine Mfr.	Indication
Novartis	*4 years of age and older*
CSL	*18 years of age and older*
Sanofi Pasteur	*6 months of age and older*
MedImmune	*healthy, nonpregnant* individuals *2-49 years of age*

ACIP Recommendations for Novel H1N1 Vaccine

- The number of doses of vaccine required for immunization against novel influenza A (H1N1) based on preliminary data:

Age	7.5 mcg dose injectable	15 mcg dose injectable	15 mcg dose nasal mist
6 – 35 months	2*		
3 – 9 years		2*	
>10 years		1	
2 – 9 years			2*
10 – 49 years			1

*Doses separated by 28 days (4 weeks)

Where can I get up-to-date information about 2009 H1N1 vaccine?

www.in.gov/flu
www.cdc.gov/h1n1flu/
www.h1n1.nejm.org

Where can I get information about billing for administration of 2009 H1N1 vaccine?
http://www.cdc.gov/H1N1flu/vaccination/statelocal/vaccine_financing.htm

HANDLING INSTRUCTIONS FOR 2009 H1N1 VACCINE

VACCINE RECEIPT INFORMATION:
Upon receipt of the package, the below steps should be followed:

- Inspect the package and contents for damage.
- Review the temperature monitor card in the package IMMEDIATELY.
- If package is damaged or if there are any concerns about vaccine integrity, please call McKesson Customer Service at 877-TEMP123 (877-836-7123) or your state/local immunization program right away.
- If the contents are in satisfactory condition, receive and process documents in accordance with the following procedures.
    - Count vials/product and place vaccine in monitored refrigerator immediately.
    - If the doses that you have received do not match the packing list, please contact your state/local immunization program right away.

Note: If multiple boxes are received, segregate the vaccine by box. Annotate box and temperature monitors/indicators to identify which temperature monitors belong to which box of vaccine (each box will contain a cold monitor and a warm monitor). The purpose of this is to be able to identify which vials or sprayers were affected if one of the boxes has become compromised in shipment.

VACCINE STORAGE INFORMATION:

- 2009 H1N1 vaccine must be maintained at a temperature of 2 to 8 degrees Celsius (35.6 to 46.4 degrees Fahrenheit). The vaccine must be kept at this temperature at all times.
- The vaccine **MUST NOT BE EXPOSED TO FREEZING TEMPERATURES!** The temperature monitoring device in your refrigerator must have a temperature reading capability to ensure the efficacy of the vaccine prior to administration. Temperature monitoring devices should be appropriately calibrated and methods used for calibration should have stated traceability to National Institute of Standards and Technology (NIST) standards. For more information on NIST traceability, open the following link. http://ts.nist.gov/Traceability/SupplMatls/suppl_matls_for_nist_policy_rev.cfm#FAQ_General. It is the receiving provider's responsibility to maintain proper storage temperature until vaccine administration.
- Any refrigerator used for vaccine storage must be dedicated to storage of biologics (i.e., food or beverages should not be stored in vaccine storage units). Refrigerators should have sufficient usable space to store the largest number of vaccine doses expected at one time without overloading. Vaccines stored in combination refrigerator/freezer units should NEVER be stored in areas directly underneath air vents, in deli-crispers/vegetable bins, or in the doors. Bottles of water can be added to these areas to create thermal mass, thus stabilizing refrigerator temperature. **Dorm-style refrigerator units (freezer and refrigerator with shared exterior door) provide poor temperature control and often freeze vaccines, therefore should not be used to store vaccines any longer than the length of a clinic for a particular clinical day (i.e., vaccines should not be stored overnight in dorm-style refrigerators).**
- The refrigerator storage unit must be electronically alarmed or manually monitored; temperatures should be recorded at a minimum of every 12 hours.

A record of these readings should be maintained at the location of the vaccine storage unit, for example on the door. Refer to the Centers for Disease Control and Prevention's Vaccine Storage and Handling Toolkit for further guidance. This site can be accessed at the following link:
http://www2a.cdc.gov/vaccines/ed/shtoolkit/pages/resources.htm.